

**NOTICE OF APPEAL FROM THE EXAMINER TO
THE BOARD OF PATENT APPEALS AND INTERFERENCES**

Docket Number
CE11296JEM

I hereby certify that this correspondence
is being electronically transmitted on:
March 28, 2008

In re Application of Stuart S. Kreitzer
Application Number 10/631,370
Filed July 31, 2003

Signature /Silvana Wiltshire/

For METHOD AND APPARATUS FOR SECURE
COMMUNICATIONS AMONG PORTABLE
COMMUNICATION DEVICES

Typed or printed name Silvana Wiltshire

Art Group 2135

Examiner Klimach, Paula W.

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 510.00

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee
shown above is reduced by half, and the resulting fee is: \$ _____

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any
over payment to Deposit Account Number **502117**.

☒ The requisite fee for a 1 month Extension of Time is being paid concurrently to this submission.

**WARNING: Information on this form may become public. Credit card information should not be
included on this form. Provide credit card information and authorization on PTO-2038.**

I am the

☐ Applicant/inventor.

/Larry G. Brown/
Signature

☐ Assignee of record of the entire interest.
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is
enclosed (Form PTO/SB/96)

Larry G. Brown
Typed or printed name

☒ Attorney or agent of record.
Registration number 45,834

954-723-6449
Telephone number

☐ Attorney or agent acting under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a). _____

March 28, 2008
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below*.

☒ * Total 1 forms are submitted.
☐ of _____